EIN (if more than one, state all): 9383

1020 South Oak Street

West Chicago, IL

Estimated Liabilities

 \checkmark

\$10 million

\$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001

\$1 million

to \$50 million \$100 million

\$50,000,001 to \$100,000,001

\$500,000,001 More than

to \$500 million to \$1 billion

ZIPCODE 60185-3837

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete

Street Address of Debtor (No. & Street, City, State & Zip Code):

Acosta, Maria R.

Name of Joint Debtor (Spouse) (Last, First, Middle):

(include married, maiden, and trade names):

EIN (if more than one, state all): 2813

1020 South Oak Street

West Chicago, IL

All Other Names used by the Joint Debtor in the last 8 years

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete

Street Address of Joint Debtor (No. & Street, City, State & Zip Code):

ZIPCODE **60185-3837**

| County of Residence or of the Principal Place of Busi DuPage | ness: | County of DuPage | Residence or of | the Principal Pla | ce of Busine | ess: |
|---|--|---|--|--|--|--|
| Mailing Address of Debtor (if different from street ad | ldress) | Mailing A | ddress of Joint D | ebtor (if differer | nt from stree | t address): |
| | ZIPCODE | | | | Z | IPCODE |
| Location of Principal Assets of Business Debtor (if di | fferent from street address | above): | | | | |
| | | | | | Z | IPCODE |
| Type of Debtor (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | Nature of (Check of (Check of Health Care Business) Single Asset Real Es U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exen | ne box.) ; ate as defined i | | the Petitio hapter 7 hapter 9 hapter 11 hapter 12 hapter 13 | n is Filed (C Chapt Recog Main Chapt Recog Nonn Nature of D (Check one l ly consumer | box.) |
| | (Check box, i ☐ Debtor is a tax-exem Title 26 of the United Internal Revenue Code | f applicable.) pt organization I States Code (t | under in | 101(8) as "incur dividual primaril ersonal, family, o old purpose." | ly for a | |
| Filing Fee (Check one box | κ) | G. I | • | Chapter 11 l | Debtors | |
| ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable to attach signed application for the court's considerati is unable to pay fee except in installments. Rule 10 3A. ☐ Filing Fee waiver requested (Applicable to chapter attach signed application for the court's consideration) | ion certifying that the debto 06(b). See Official Form 7 individuals only). Must | Debtor Check if: Debtor' affiliate Check all a | is a small busine is not a small bus s aggregate nonc s are less than \$2 applicable boxes s being filed with | contingent liquida 2,190,000. | defined in 11 ated debts ov | S.C. § 101(51D). 1 U.S.C. § 101(51D). ved to non-insiders or om one or more classes of |
| Statistical/Administrative Information ✓ Debtor estimates that funds will be available for d Debtor estimates that, after any exempt property i distribution to unsecured creditors. | | ditors. | | | | THIS SPACE IS FOR COURT USE ONLY |
| Estimated Number of Creditors | 0- 5,001- | | 25,001- 50,000 | 50,001- 100,000 | Over 100,000 | |
| Estimated Assets So to \$50,001 to \$100,001 to \$500,001 to \$1,000 \$50,000 \$1 million \$100,000 \$1 million \$ | 00,001 to \$10,000,001 Smillion to \$50 million | 550,000,001 to 3100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | |

| Where Filed: | Case Number: | Date Filed: | |
|---|--|--|-----------------------------|
| Pending Bankruptcy Case Filed by any Spouse, Partner or | Affiliate of this Debtor | (If more than one, attach additional she | eet) |
| Name of Debtor: None | Case Number: | Date Filed: | |
| District: | Relationship: | Judge: | |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. | whose debt I, the attorney for the peti that I have informed the chapter 7, 11, 12, or 13 explained the relief avail | Exhibit B upleted if debtor is an individual sare primarily consumer debts.) tioner named in the foregoing petition, of petitioner that [he or she] may proceed a of title 11, United States Code, and able under each such chapter. I further ebtor the notice required by § 342(b) | d unde d have certify |
| | X /s/ Timothy K. Lio | u 1/0 | 08/08 |
| | Signature of Attorney for De | | Date |
| ✓ No Exh (To be completed by every individual debtor. If a joint petition is filed, e ✓ Exhibit D completed and signed by the debtor is attached and many | | nd attach a separate Exhibit D.) | |
| If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached. | ned a made a part of this peti | tion. | |
| Information Regardi (Check any a ☐ Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180 | ing the Debtor - Venue applicable box.) of business, or principal asso 0 days than in any other Dis | ets in this District for 180 days immediat | ely |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in the or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | assets in the United States in this Distri on or proceeding [in a federal or state cou | |
| Certification by a Debtor Who Resid (Check all app Landlord has a judgment against the debtor for possession of del | plicable boxes.) | • • | |
| (Name of landlord or less | sor that obtained judgment) | | |
| (Address of la | ndlord or lessor) | | |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Case 08-00304 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

Voluntary Petition

Where Filed: None

Location

Doc 1

Filed 01/08/08

Document

Entered 01/08/08 13:31:29 Desc Main

Date Filed:

Acosta, Mario A. & Acosta, Maria R.

Page 2

Page 2 of 40

Name of Debtor(s):

Case Number:

Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main B1 (Official Form 1) (1/08) Document Page 3 of 40 Name of Debtor(s): **Voluntary Petition** Acosta, Mario A. & Acosta, Maria R.

(This page must be completed and filed in every case) **Signatures** Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ Mario A. Acosta Mario A. Acosta Signature of Debtor X /s/ Maria R. Acosta Maria R. Acosta Signature of Joint Debtor Telephone Number (If not represented by attorney) January 8, 2008 Signature of Attorney* X /s/ Timothy K. Liou Signature of Attorney for Debtor(s) Timothy K. Liou 06229724 Printed Name of Attorney for Debtor(s) Law Office Of Timothy K. Liou Suite 361 575 West Madison Street Address Chicago, IL 60661-2614 Telephone Number January 8, 2008 *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Title of Authorized Individual

Date

Printed Name of Authorized Individual

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

| I request relief in accordance with chapter 15 of title 11, United |
|---|
| States Code. Certified copies of the documents required by 11 U.S.C |
| § 1515 are attached. |

| Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the |
|---|
| chapter of title 11 specified in this petition. A certified copy of the |
| order granting recognition of the foreign main proceeding is attached |

| Χ | |
|---|--|
| | Signature of Foreign Representative |
| Χ | |
| | Printed Name of Foreign Representative |

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

| , | ١ | / |
|---|---|---|
| 4 | / | \ |
| | | |

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main Page 4 of 40

Acosta, Mario A. 1020 South Oak Street West Chicago, IL 60185-3837 Document Carson Pirie Scott **Retail Services** Box 17264

Baltimore, MD 21297-1264

Commonwealth Edison Bill Payment Center Chicago, IL 60668-0001

Acosta, Maria R. 1020 South Oak Street West Chicago, IL 60185-3837 **Central Dupage Emergency Physicians Box 366**

Hinsdale, IL 60522

Dupage County State's Attorney C/O Alliance One Receivable Management 6565 Kimball Drive, Suite 200 Gig Harbor, WA 98335

Law Office Of Timothy K. Liou Suite 361 575 West Madison Street Chicago, IL 60661-2614

Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190

Dupage Medical Group 1860 Paysphere Circle Chicago, IL 60674

Advance Call Center Technologies Box 8457 Gray, TN 37615

Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190-1295

FIA Card Services, NA Box 15137 Wilmington, DE 19850-5137

Alliance One Receivable Management Suite 200 6565 Kimball Drive Gig Harbor, WA 98335

Central Dupage Hospital Box 4698 Carol Stream, IL 60197-4698 **First Premier Bank** Box 5147 Sioux Falls, SD 57117-5147

Aspire Payment Processing Box 23007 Columbus, GA 31902-3007 Chase Box 15153 Wilmington, DE 19886-5153

Gap Box 530942 Atlanta, GA 30353-0942

Bank Of America Box 15726 Wilmington, DE 19886 Choi, MD Faap Soon Ja 2 S. 631 Route 59 Warrenville, IL 60555

Hola Telefonica Unit 133 650 East Devon Street Itasca, IL 60143

Bryan W. Rubach, M. D. Suite 225 4050 Healthway Drive Aurora, IL 60504

Citi Cards Box 45129 Jacksonville, FL 32232 **HSBC Card Services** Box 17051 Baltimore, MD 21297-1051

Capital One Bankruptcy Department Box 5294 Carol Stream, IL 60197-5294 City Of West Chicago Box 87345 Chicago, IL 60680-0345 **HSBC Mortgage Services** Box 17580 Baltimore, MD 21297-1580

Capital One Box 70886 Charlotte, NC 28272-9903 **Comcast Cable** Box 3002 Southeastern, PA 60661 Ira T. Nevel, Esq. Suite 201 175 North Franklin Chicago, IL 60606

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main

ISPC 6420 Benjamin Road Tampa, FL 33634-5199 Document Page 5 of 40 New York & Company Box 659728 San Antonio, TX 78265-9728

World Financial Network National Bank Box 182125 Columbus, OH 43218-2125

JC Penney Box 981403

El Paso, TX 79998-1403

Nicor Northern Illinois Gas Box 310 Aurora, IL 60507-0310

John M. Yancey, DDS 1033 South Oak Street West Chicago, IL 60185

Providian Box 6600433 Dallas, TX 75266-0433

Jose Duran 1020 S. Oak Street West Chicago, IL 60185-3837 Sears Card Box 183081 Columbus, OH 43218-3081

Lane Bryant Box 659728 San Antonio, TX 78265-9728 Target National Bank Box 59317 Minneapolis, MN 55459-0317

Medical Accounting Service Box 7100 5626 Frantz Road Dublin, OH 43017-0704 U. S. Cellular Box 0203 Palatine, IL 53707-7835

Medical Business Bureau, Inc. Suite 171 1175 Devin Drive Norton Shores, MI 49441 Washington Mutual Card Services Box 99604 Arlington, TX 76096-9604

Menard, Inc. Civil Restitution, C/O Security Dept. Box 538 Eau Claire, WI 54702-0538 Wells Fargo Bankruptcy Department 13675 Technology Drive, Bldg C, 2nd Fl Eden Prairie, MN 55344-2252

Merchant's Credit Guide 223 West Jackson Blvd Chicago, IL 60606 Wells Fargo Home Mortgage Box 14411 Des Moines, IA 50306-3411

NARS Call Center Solutions Box 701 Chesterfield, MO 63006-0701 Winfield Laboratory Consultants, S.C. 25 North Winfield Road Winfiled, IL 60190

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main Document Page 6 of 40 United States Bankruptcy Court Northern District of Illinois

| IN RE: | | Case No |
|-------------------------------------|--|---|
| Acosta, Mario A. & Acosta, Maria R. | | Chapter 13 |
| | Debtor(s) | |
| | VERIFICATION OF CREDIT | TOR MATRIX |
| | | Number of Creditors48 |
| The above-named Debtor(s) he | ereby verifies that the list of creditors is | true and correct to the best of my (our) knowledge. |
| Date: January 8, 2008 | /s/ Mario A. Acosta | |
| | Debtor | |
| | /s/ Maria R. Acosta | |
| | Joint Debtor | |

Case 08-00304 Doc 1

© 1993-2007 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main Document Page 7 of 40 United States Bankruptcy Court Northern District of Illinois Filed 01/08/08

| IN | NRE: | | Case No. |
|----|---|---|---|
| Αc | costa, Mario A. & Acosta, Maria R. | | Chapter 13 |
| | Debtor(s) | | • |
| | DISCLOSURE OF C | OMPENSATION OF ATTORNEY I | FOR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 201 one year before the filing of the petition in bankruptcy, or of or in connection with the bankruptcy case is as follows: | agreed to be paid to me, for services rendered or to be | |
| | For legal services, I have agreed to accept | | \$\$3,500.00 |
| | Prior to the filing of this statement I have received | | \$\$ |
| | Balance Due | | \$139.00 |
| 2. | The source of the compensation paid to me was: | otor Other (specify): | |
| 3. | The source of compensation to be paid to me is: | otor Other (specify): | |
| 4. | I have not agreed to share the above-disclosed compe | nsation with any other person unless they are members | s and associates of my law firm. |
| | I have agreed to share the above-disclosed compensatiogether with a list of the names of the people sharing | tion with a person or persons who are not members or g in the compensation, is attached. | associates of my law firm. A copy of the agreement, |
| 5. | In return for the above-disclosed fee, I have agreed to rend | er legal service for all aspects of the bankruptcy case, i | including: |
| | b. Preparation and filing of any petition, schedules, stat | ers and confirmation hearing, and any adjourned hearing and other contested bankruptey matters; | |
| 6. | By agreement with the debtor(s), the above disclosed fee Representation pursuant to Sec. 523 shall | | |
| | | CERTIFICATION | |
| | certify that the foregoing is a complete statement of any agroroceeding. | | station of the debtor(s) in this bankruptcy |
| _ | January 8, 2008 | /s/ Timothy K. Liou | |
| | Date | Signature o | f Attorney |
| ı | | Law Office Of Timothy K. Liou | |

Name of Law Firm

Case 08-00304 Official Form 1, Exhibit D (10/06)

Doc 1 Filed 01/08/08

Entered 01/08/08 13:31:29

Desc Main

Document Page 8 of 40 United States Bankruptcy Court

Northern District of Illinois

| IN RE: | Case No |
|------------------|------------|
| Acosta, Mario A. | Chapter 13 |
| Debt | or(s) |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

| Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed. |
|--|
| 1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. |
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. |
| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] |
| |
| |

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by motion for determination by the court.] |
|--|
| Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, t participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone. |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(bdoes not apply in this district. |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Mario A. Acosta | |
|----------------------|---------------------|--|
| - | | |

Date: January 8, 2008

Case 08-00304 Official Form 1, Exhibit D (10/06)

Doc 1

Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main

| Document | Page 9 of 40 |) |
|------------------|-------------------|---|
| United States Ba | nkruptcy Court | t |
| Northern Dis | trict of Illinois | |

| IN RE: | Case No |
|------------------|------------|
| Acosta, Maria R. | Chapter 13 |
| Debtor(s | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by

| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in |
|---|
| performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the |
| certificate and a copy of any debt repayment plan developed through the agency. |
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by |
| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in |
| performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file |
| a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through |
| the agency no later than 15 days after your bankruptcy case is filed. |

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed

| usinisse. |
|---|
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by motion for determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapabl of realizing and making rational decisions with respect to financial responsibilities.); |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone. |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h does not apply in this district. |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Maria R. Acosta | |
|----------------------|---------------------|--|
| - | | |

Date: January 8, 2008

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Mair Document Page 11 of 40

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by $\S 342(b)$ of the Bankruptcy Code.

| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: | Social Security number (If the bankruptcy petition preparer is not an individual, state |
|---|--|
| | the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above. | - |
| Certificate of the Debtor | |

I (We), the debtor(s), affirm that I (we) have received and read this notice.

| Acosta, Mario A. & Acosta, Maria R. | X /s/ Mario A. Acosta | 1/08/2008 |
|-------------------------------------|------------------------------------|-----------|
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X /s/ Maria R. Acosta | 1/08/2008 |
| | Signature of Joint Debtor (if any) | Date |

 $_{B6\;Summary}\left(F_{0}ase\ 08-00304_{007}\right) Doc\ 1$

Entered 01/08/08 13:31:29 Filed 01/08/08

Document Page 12 of 40 United States Bankruptcy Court **Northern District of Illinois**

Desc Main

| IN RE: | Case No |
|-------------------------------------|------------|
| Acosta, Mario A. & Acosta, Maria R. | Chapter 13 |
| Debtor(s) | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NUMBER OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|---------------------|---------------|---------------|-------------|
| A - Real Property | Yes | 1 | \$ 240,000.00 | | |
| B - Personal Property | Yes | 3 | \$ 37,700.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 2 | | \$ 227,349.25 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 9 | | \$ 46,102.56 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | \$ 4,398.39 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 1,036.00 |
| | TOTAL | 22 | \$ 277,700.00 | \$ 273,451.81 | |

Form 6 - Statistical Summary (12/07)

Doc 1 Filed 01/08/08

Entered 01/08/08 13:31:29 Desc Main

Document United St. Page 13 of 40

| nited | l States | Ban | krup1 | tcy (| Court |
|-------|----------|--------|-------|-------|-------|
| Nor | thern I | Distri | ct of | Illir | ois |

| IN RE: | Case No |
|-------------------------------------|------------|
| Acosta, Mario A. & Acosta, Maria R. | Chapter 13 |
| Debtor(s) | • |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 4,398.39 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 1,036.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ 3,966.09 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 2,523.35 |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 46,102.56 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 48,625.91 |

 $_{B6A \text{ (Official FGRSA)}} Q8_{70} Q0304 \quad Doc 1$

Filed 01/08/08 Document Entered 01/08/08 13:31:29 Page 14 of 40 Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R

Debtor(s)

Case No.

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|---|--|---------------------------------------|---|----------------------------|
| Debtor's primary residence commonly known as 1020 South Oak Street, West Chicago, IL 60185-3837 | | J | 240,000.00 | 223,325.90 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

TOTAL

240,000.00

(Report also on Summary of Schedules)

Entered 01/08/08 13:31:29 Page 15 of 40 Desc Main

IN RE Acosta, Mario A. & Acosta, Maria R

Debtor(s)

Case No. _____(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY | | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|------------------|---|------------------|---|---------------------------------------|--|
| 1. | Cash on hand. | X | | | |
| 2. | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking account held by State Bank of Illinois | J | 500.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | Miscellaneous depreciated household goods and furnishings Water filter | J | 1,000.00 1,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. | Wearing apparel. | | Necessary wearing apparel and shoes | | 400.00 |
| 7. | Furs and jewelry. | X | | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Two term life insurance policies held by Primerica Insurance Company, no cash value | J | 0.00 |
| 10. | Annuities. Itemize and name each issue. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | Qualified 401(k) plan held by employer | Н | 33,000.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | Х | | | |
| | | | | | |

Entered 01/08/08 13:31:29 Desc Main Page 16 of 40

IN RE Acosta, Mario A. & Acosta, Maria R.

_ Case No. _

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|--|---------------------------------------|--|
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | Х | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 1992 Dodge Caravan with 160k miles 1999 Chevrolet Express with 175k miles | H H | 500.00 800.00 |
| 26 | Roate motors and accessories | Х | · | | |
| | Boats, motors, and accessories. Aircraft and accessories. | X | | | |
| | Office equipment, furnishings, and | X | | | |
| | supplies. Machinery, fixtures, equipment, and supplies used in business. | x | | | |
| 30 | Inventory. | х | | | |
| | Animals. | X | | | |
| | | | | | |

| B6B (Official Forms B) 12770304 | Doc 1 | Filed 01/08/08 | Entered 01 |
|--------------------------------------|-------|----------------|------------|
| BOB (OINCIAI I OINI OB) (12/07) CONG | | Document | Dago 17 of |

IN RE Acosta, Mario A. & Acosta, Maria R.

Page 17 of 40

L/08/08 13:31:29 Desc Main

Debtor(s)

Case No. _____(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| 32. Crops - growing or harvested. Give particulars. | Х | | | |
| 33. Farming equipment and implements. | х | | | |
| 34. Farm supplies, chemicals, and feed. | Х | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | TO | ГАТ. | 37,700.00 |

Doc 1 Filed 01/08/08 Document

Debtor(s)

Entered 01/08/08 13:31:29

Desc Main

IN RE Acosta, Mario A. & Acosta, Maria R.

nt Page 18 of 40

Case No. ______(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|---|--------------------------------------|-------------------------------|--|
| SCHEDULE A - REAL PROPERTY | | | |
| Debtor's primary residence commonly known as 1020 South Oak Street, West Chicago, IL 60185-3837 | 735 ILCS 5/12-901 | 30,000.00 | 240,000.00 |
| SCHEDULE B - PERSONAL PROPERTY | | | |
| Checking account held by State Bank of | 735 ILCS 5/12-1001(b) | 500.00 | 500.00 |
| Miscellaneous depreciated household goods and furnishings | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 |
| Water filter | 735 ILCS 5/12-1001(b) | 1,500.00 | 1,500.00 |
| Necessary wearing apparel and shoes | 735 ILCS 5/12-1001(a) | 400.00 | 400.00 |
| Qualified 401(k) plan held by employer | 735 ILCS 5/12-1006 | 33,000.00 | 33,000.00 |
| 1992 Dodge Caravan with 160k miles | 735 ILCS 5/12-1001(c) | 500.00 | 500.00 |
| 1999 Chevrolet Express with 175k miles | 735 ILCS 5/12-1001(b) | 800.00 | 800.00 |
| | | | |

Entered 01/08/08 13:31:29 Page 19 of 40

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R

Debtor(s)

Case No.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 01068 02 | | J | water service | | | | 176.90 | |
| City Of West Chicago Box 87345 Chicago, IL 60680-0345 | | | VALUE \$ 240,000.00 | | | | | |
| ACCOUNT NO. 0010340545 | | J | Second mortgage on Debtor's primary | H | | | 47,479.00 | |
| HSBC Mortgage Services Box 17580 Baltimore, MD 21297-1580 | | | residence; arrears to be paid through plan are \$4,277.00 | | | | , | |
| | | | VALUE \$ 240,000.00 | | | | | |
| ACCOUNT NO. 1210-0000-0002-9140 | | J | PMSI water filter | | | | 4,023.35 | 2,523.35 |
| ISPC 6420 Benjamin Road Tampa, FL 33634-5199 | | | | | | | | |
| | | _ | VALUE \$ 1,500.00 | L | | | . | |
| ACCOUNT NO. 0144646197 Wells Fargo Home Mortgage Box 14411 | | J | Mortgage on Debtor's primary residence; arrears to be paid through plan are \$28,675.00 | | | | 175,670.00 | |
| Des Moines, IA 50306-3411 | | ļ | | | | | | |
| | | | VALUE \$ 240,000.00 | | | | | |
| 1 continuation sheets attached | | | (Total of the | | otota | | \$ 227,349.25 | \$ 2,523.35 |
| | | | (Use only on la | | Tota page | | \$ (Report also on | \$ (If applicable, report |

Summary of Schedules.)

also on Statistical Summary of Certain Liabilities and Related Data.)

Entered 01/08/08 13:31:29 Desc Main Page 20 of 40

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

| (Continuation Sheet) | | | | | | | | |
|---|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | | |
| Ira T. Nevel, Esq. Suite 201 175 North Franklin Chicago, IL 60606 | | | Wells Fargo Home Mortgage | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | | |
| Wells Fargo Bankruptcy Department 13675 Technology Drive, Bldg C, 2nd Fl Eden Prairie, MN 55344-2252 | | | Wells Fargo Home Mortgage | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | _ | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | VALUE\$ | | | | | |
| Sheet no. 1 of 1 continuation sheets attach | ed | to | | Sul | otot | al | | |
| Schedule of Creditors Holding Secured Claims | | | (Total of the | nis į | pag Tot | e) al | \$ | \$ |
| | | | (Use only on l | ast j | pag | e) | \$ 227,349.25 | \$ 2,523.35 |

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

© 1993-2007 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Filed 01/08/08 Document Entered 01/08/08 13:31:29 Page 21 of 40 Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R

Debtor(s)

Case No.

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Stat | istical Julilliary of Certain Labilities and Related Data. |
|-------|---|
| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data. |
| V | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| ΤY | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |
| | O continuation sheets attached |

Entered 01/08/08 13:31:29 Page 22 of 40 Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R

Debtor(s)

Case No. ____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------|---------------------------------------|--|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 4564-1900-0532-3372 | | J | charge | | | | |
| Aspire Payment Processing Box 23007 Columbus, GA 31902-3007 | - | | | | | | 2,069.32 |
| ACCOUNT NO. 4791-0701-1796-2041 | | J | charge | | | П | |
| Aspire Payment Processing Box 23007 Columbus, GA 31902-3007 | | | | | | | 3,736.67 |
| ACCOUNT NO. 5329-0645-7800-6016 | | J | charge | | | П | · |
| Bank Of America Box 15726 Wilmington, DE 19886 | - | | | | | | 5,603.24 |
| ACCOUNT NO. | T | | Assignee or other notification for: | | \exists | П | , |
| Advance Call Center Technologies Box 8457 Gray, TN 37615 | | | Bank Of America | | | | |
| 8 continuation sheets attached | | | (Total of th | Subi | | | § 11,409.23 |
| Continuation sheets attached | | | (Total of ut | | age 'ota | t | ψ, |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Related | atis | tica | al | \$ |

Entered 01/08/08 13:31:29 Page 23 of 40

Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. ____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
|--|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Assignee or other notification for: | + | | | |
| FIA Card Services, NA Box 15137 Wilmington, DE 19850-5137 | | | Bank Of America | | | | |
| ACCOUNT NO. 4888-6084-0035-3065 | | J | charge | | | | + |
| Bank Of America Box 15726 Wilmington, DE 19886 | | | | | | | 2 200 5 |
| ACCOUNT NO. 4888-9310-7281-3830 | | J | charge | | | | 3,098.54 |
| Bank Of America Box 15726 Wilmington, DE 19886 | | | | | | | 3,220.9 ⁻ |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 3,220.9 |
| FIA Card Services, NA Box 15137 Wilmington, DE 19850-5137 | | | Bank Of America | | | | |
| ACCOUNT NO. 25675 | | J | medical service | | | | |
| Bryan W. Rubach, M. D. Suite 225 4050 Healthway Drive Aurora, IL 60504 | | | | | | | 11.20 |
| ACCOUNT NO. 5291-1520-6431-2842 | | J | charge | + | | | 11.20 |
| Capital One Bankruptcy Department Box 5294 Carol Stream, IL 60197-5294 | | | | | | | 2 050 20 |
| ACCOUNT NO. | \vdash | | Assignee or other notification for: | | H | H | 3,059.20 |
| Capital One Box 70886 Charlotte, NC 28272-9903 | | | Capital One | | | | |
| Sheet no1 of8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sul this p | | | \$ 9,389.8 |
| | | | (Use only on last page of the completed Schedule F. Rep the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Rela | ort al: Stati | stic | on al | \$ |

Entered 01/08/08 13:31:29 Page 24 of 40

Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
|--|---|---|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | INCLUDING ZIP CODE, AND ACCOUNT NUMBER. | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 5291-1520-9399-6490 | | J | charge | Н | | H | |
| Capital One Bankruptcy Department Box 5294 Carol Stream, IL 60197-5294 | - | | | | | | 857.27 |
| ACCOUNT NO. 12-2543-9371 | | J | medical service | П | | | |
| Carson Pirie Scott Retail Services Box 17264 Baltimore, MD 21297-1264 | | | | | | | 188.98 |
| ACCOUNT NO. 003 2152 | | J | medical service | H | | | |
| Central Dupage Emergency Physicians Box 366 Hinsdale, IL 60522 | | | | | | | 128.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 120.00 |
| Medical Business Bureau, Inc. Suite 171 1175 Devin Drive Norton Shores, MI 49441 | | | Central Dupage Emergency Physicians | | | | |
| ACCOUNT NO. 003 4967 | | J | medical service | H | | | |
| Central Dupage Emergency Physicians Box 366 Hinsdale, IL 60522 | | | | | | | 40.00 |
| ACCOUNT NO. 08-072610142 | | J | medical service | Н | | \dashv | 12.80 |
| Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190 | | | | | | | 405.5- |
| ACCOUNT NO. | \vdash | | Assignee or other notification for: | \vdash | | | 165.07 |
| Merchant's Credit Guide 223 West Jackson Blvd Chicago, IL 60606 | | | Central Dupage Hospital | | | | |
| Sheet no 2 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | - | age | ;) | \$ 1,352.12 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | t als tatis | tica | n al | \$ |

Document

Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Page 25 of 40

Desc Main

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _ (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (• | Continuation Sheet) | | | | |
|--|----------|---------------------------------------|---|------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 5230631 | | J | medical service | | | H | |
| Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190 | - | | | | | | 569.50 |
| ACCOUNT NO. 5226957001 | | J | medical service | | | Н | 309.30 |
| Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190-1295 | - | | | | | | 1,459.25 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 1,400.20 |
| Central Dupage Hospital Box 4698 Carol Stream, IL 60197-4698 | - | | Central Dupage Hospital | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | |
| Medical Accounting Service Box 7100 5626 Frantz Road Dublin, OH 43017-0704 | | | Central Dupage Hospital | | | | |
| ACCOUNT NO. 728951551410X | | J | medical service | | | | |
| Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190 | - | | | | | | 400.40 |
| ACCOUNT NO. 727857240690X | | J | medical service | | | \vdash | 130.43 |
| Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190 | - | | | | | | 1 404 62 |
| ACCOUNT NO. 727851459630X | | J | medical service | | | \vdash | 1,494.63 |
| Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190 | _ | | | | | | |
| | | | | | | Ц | 298.80 |
| Sheet no 3 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | 7 | age Fota | e) al | \$ 3,952.61 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | tatis | tica | al | \$ |

Doc 1 File

Filed 01/08/08 Document

Entered 01/08/08 13:31:29 Page 26 of 40

Desc Main

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _____(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
|---|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 4266-8410-8350-4058 | | J | charge | \dagger | | | |
| Chase Box 15153 Wilmington, DE 19886-5153 | | | | | | | 1,603.08 |
| ACCOUNT NO. 920 | | J | medical service | + | | | 1,000.00 |
| Choi, MD Faap Soon Ja 2 S. 631 Route 59 Warrenville, IL 60555 | | | | | | | 18.10 |
| ACCOUNT NO. 01238 | | J | medical service | + | | | 16.10 |
| Choi, MD Faap Soon Ja 2 S. 631 Route 59 Warrenville, IL 60555 | | | | | | | 41.00 |
| ACCOUNT NO. 8798 20 038 0395876 | | J | cable service | + | | | 41.00 |
| Comcast Cable Box 3002 Southeastern, PA 60661 | | | | | | | |
| ACCOUNT NO. 8852055011 | | J | electric service | ╁ | | | 181.43 |
| Commonwealth Edison Bill Payment Center Chicago, IL 60668-0001 | | | | | | | 278.12 |
| ACCOUNT NO. 1995TR009551 | | J | collection for traffic violation | + | | | 270.12 |
| Dupage County State's Attorney C/O Alliance One Receivable Management 6565 Kimball Drive, Suite 200 Gig Harbor, WA 98335 | | | | | | | 279.50 |
| ACCOUNT NO. | H | | Assignee or other notification for: | + | H | H | 213.30 |
| Alliance One Receivable Management Suite 200 6565 Kimball Drive Gig Harbor, WA 98335 | | | Dupage County State's Attorney | | | | |
| Sheet no 4 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | - | age | e) | \$ 2,401.23 |
| | | | (Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat | rt als Statis | stic | on al | \$ |

Document

Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main Page 27 of 40

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (, | Continuation Sheet) | | | | |
|--|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 55640 | | J | medical service | | | | |
| Dupage Medical Group 1860 Paysphere Circle Chicago, IL 60674 | | | | | | | 304.40 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | |
| Merchant's Credit Guide 223 West Jackson Blvd Chicago, IL 60606 | | | Dupage Medical Group | | | | |
| ACCOUNT NO. 55640-68976461 | | J | medical service | | | H | |
| Dupage Medical Group 1860 Paysphere Circle Chicago, IL 60674 | • | | | | | | 20.30 |
| ACCOUNT NO. 55640-68856009 | | J | medical service | | | H | |
| Dupage Medical Group 1860 Paysphere Circle Chicago, IL 60674 | - | | | | | | 47.10 |
| ACCOUNT NO. 55640-68917078 | | J | medical service | | | | 47.10 |
| Dupage Medical Group 1860 Paysphere Circle Chicago, IL 60674 | - | | | | | | 17.90 |
| ACCOUNT NO. 55640-69097634 | | J | medical service | | | Н | 17.90 |
| Dupage Medical Group 1860 Paysphere Circle Chicago, IL 60674 | | | | | | | |
| | | | -1 | L | | Н | 3,910.80 |
| ACCOUNT NO. 5178-0070-8350-5131 | 1 | J | charge | | | | |
| First Premier Bank Box 5147 Sioux Falls, SD 57117-5147 | | | | | | | |
| Sheet no 5 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | Sub | | | \$ 4,911.35 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | t als tatis | tica | n al | \$ |

Entered 01/08/08 13:31:29 Page 28 of 40

Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
|--|----------|---------------------------------------|---|------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 6018595509229361 | | J | charge | П | | | |
| Gap Box 530942 Atlanta, GA 30353-0942 | | | | | | | 1,124.53 |
| ACCOUNT NO. 4425 | | J | telephone service | | | | 1,124.00 |
| Hola Telefonica Unit 133 650 East Devon Street Itasca, IL 60143 | | | | | | | 157.81 |
| ACCOUNT NO. 5488-8500-0038-4451 | | J | charge | | | | |
| HSBC Card Services Box 17051 Baltimore, MD 21297-1051 | | | | | | | 1,427.78 |
| ACCOUNT NO. 248-570-347-0 | | J | charge | | | | 1,421.10 |
| JC Penney Box 981403 El Paso, TX 79998-1403 | | | | | | | 330.02 |
| ACCOUNT NO. 02878 | | J | medical service | | | | 000.02 |
| John M. Yancey, DDS 1033 South Oak Street West Chicago, IL 60185 | | | | | | | 118.00 |
| ACCOUNT NO. 6978000062302695 | | J | charge | Н | | + | 110.00 |
| Lane Bryant Box 659728 San Antonio, TX 78265-9728 | | | | | | | |
| ACCOUNT NO. 2140 4224 4045 | | J | collection | Н | | \dashv | 1,391.57 |
| ACCOUNT NO. 3140-1231-1915 Menard, Inc. Civil Restitution, C/O Security Dept. Box 538 Eau Claire, WI 54702-0538 | | J | Concetion | | | | |
| Sheet no. 6 of 8 continuation sheets attached to | | | | Sub | tota | | 100.00 |
| Sheet no. Or Or Continuation sneets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | is p | age | ;) | \$ 4,649.71 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate | als | tica | n ıl | \$ |

Document

Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Page 29 of 40

Desc Main

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. _ (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (• | Continuation Sheet) | | | | |
|---|----------|---------------------------------------|--|------------------------------|----------------------------|-----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 553-697-306 | | J | charge | H | | H | |
| New York & Company Box 659728 San Antonio, TX 78265-9728 | | | | | | | 4 590 20 |
| ACCOUNT NO. | | | Assignee or other notification for: | + | | \dashv | 1,589.29 |
| World Financial Network National Bank Box 182125 Columbus, OH 43218-2125 | | | New York & Company | | | | |
| ACCOUNT NO. 44-88-89-0000 6 | | J | natural gas service | | | H | |
| Nicor Northern Illinois Gas Box 310 Aurora, IL 60507-0310 | | | | | | | 205.00 |
| ACCOUNT NO. 5121-0750-4825-7377 | | J | charge | | | \forall | 205.00 |
| Sears Card Box 183081 Columbus, OH 43218-3081 | | | | | | | |
| ACCOUNT NO. 5049-9480-4435-0801 | | J | charge | | | \dashv | 439.40 |
| Sears Card Box 183081 Columbus, OH 43218-3081 | | | | | | | 040.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | \dashv | 819.66 |
| Citi Cards Box 45129 Jacksonville, FL 32232 | | | Sears Card | | | | |
| ACCOUNT NO. 4352-3750-5810-0746 | | J | charge | | | \dashv | |
| Target National Bank Box 59317 Minneapolis, MN 55459-0317 | | | | | | | |
| Sheet no. 7 of 8 continuation sheets attached to | L | | | Sub | tota | | 1,644.77 |
| Sheet no. <u>7</u> of <u>8</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | nis p T t als tatis | age Fota o o tica | e) S | \$ 4,698.12 \$ |

Filed 01/08/08 Doc 1 Document

Entered 01/08/08 13:31:29 Page 30 of 40

Desc Main

(If known)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
|---|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Assignee or other notification for: | t | | Н | |
| NARS Call Center Solutions Box 701 Chesterfield, MO 63006-0701 | | | Target National Bank | | | | |
| ACCOUNT NO. 960415820 | | J | cellular phone service | | | | |
| U. S. Cellular Box 0203 Palatine, IL 53707-7835 | | | | | | | 439.64 |
| ACCOUNT NO. 4559-5122-0054-5011 | | | charge | | | Н | 439.04 |
| Washington Mutual Card Services Box 99604 Arlington, TX 76096-9604 | | | | | | | 2,687.10 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 2,007.10 |
| Providian Box 6600433 Dallas, TX 75266-0433 | | | Washington Mutual Card Services | | | | |
| ACCOUNT NO. 727851467190X | | J | medical service | | | Н | |
| Winfield Laboratory Consultants, S.C. 25 North Winfield Road Winfiled, IL 60190 | | | | | | | 044.00 |
| ACCOUNT NO. | | | | | | | 211.60 |
| | | | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | |
| Sheet no. $\underline{\bf 8}$ of $\underline{\bf 8}$ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | Sub nis p | | | \$ 3,338.34 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | t als tatis | tica | n al | \$ 46,102.56 |

| B6G (Official EGASE) 08700304 | Doc 1 | Filed 01/08/08 | Entered 01/08/08 13:31:2 |
|--------------------------------|-------|----------------|--------------------------|
| 200 (Olikimi 1 01m 00) (12/07) | | Document | Page 31 of 40 |

IN RE Acosta, Mario A. & Acosta, Maria R.

ocument Page 31 of 4

Case No. _

tou(a)

Debtor(s)

(If known)

Desc Main

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTERES' STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|---|
| e Duran 0 S. Oak Street st Chicago, IL 60185-3837 | Oral leasehold agreement for \$700/mo |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

B6H (Official Form on) 0870 0304 Doc 1

Filed 01/08/08 Document Entered 01/08/08 13:31:29 Page 32 of 40

Case No. _

Desc Main

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Entered 01/08/08 13:31:29 Page 33 of 40 Desc Main

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Case No. ______(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status | • | DEPENDENTS (| OF DEBTOR ANI |) SPOU | SE | | |
|---|--------------------------------|--|-----------------|--------|----------|--------|--------|
| Married | | RELATIONSHIP(S): See Schedule Attached | | | | AGE(S) | : |
| | | | | | | | |
| EMPLOYMENT: | | DEBTOR | | | SPOUSE | | |
| Occupation | Assembler | Ur | nemployed | | ~- · · | | |
| Name of Employer | Elgin Sweepe | | nemployed | | | | |
| How long employed | 6 years | - . | | | | | |
| Address of Employer | 1300 West Ba Elgin, IL 6012 | | | | | | |
| | | | | | | | |
| | _ | or projected monthly income at time case filed) | | _ | DEBTOR | | SPOUSE |
| | | alary, and commissions (prorate if not paid mo | nthly) | \$ — | 2,600.21 | | |
| 2. Estimated month | ily overtime | | | \$ | 432.60 | | |
| 3. SUBTOTAL | | | | \$ | 3,032.81 | \$ | 0.00 |
| LESS PAYROL a. Payroll taxes a | | | | ¢ | 393.28 | ¢ | |
| b. Insurance | Ilu Suciai Secui. | ity | | \$ | 137.20 | | |
| c. Union dues | | | | \$ | | \$ | |
| d. Other (specify) | Supplement | tal Life | | \$ | 3.94 | \$ | |
| | | | | - \$ | | \$ | |
| 5. SUBTOTAL O | | | | \$ | 534.42 | | 0.00 |
| 6. TOTAL NET M | 10NTHLY TA | KE HOME PAY | | \$ | 2,498.39 | \$ | 0.00 |
| | | of business or profession or farm (attach detail | led statement) | \$ | | \$ | |
| 8. Income from rea | | | | \$ | 1,200.00 | \$ | |
| 9. Interest and divid | | ort payments payable to the debtor for the deb | stor's use or | \$ | | \$ | |
| that of dependents | | ort payments payable to the debtor for the deb | tor's use or | \$ | | \$ | |
| 11. Social Security | | ment assistance | | Ψ | | Ψ | |
| (Specify) Food S | | | | \$ | | \$ | 700.00 |
| | | | | - \$ | | \$ | |
| 12. Pension or retir | | | | \$ | | \$ | |
| 13. Other monthly (Specify) | псоте | | | \$ | | \$ | |
| (bpecii _j) | | | | · \$ | | \$ | |
| | | | | \$ | | \$ | |
| 14. SUBTOTAL O | OF LINES 7 TH | HROUGH 13 | | \$ | 1,200.00 | \$ | 700.00 |
| 15. AVERAGE M | ONTHLY INC | COME (Add amounts shown on lines 6 and 14 | 1) | \$ | 3,698.39 | \$ | 700.00 |
| 16 COMRINED | AVERAGE MO | ONTHLY INCOME: (Combine column total | ls from line 15 | | | | |
| | | otal reported on line 15) | 5 Hom 12, | | \$ | 4,398. | 39 |

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Main Document Page 34 of 40

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

Niece

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

_ Case No. _

Continuation Sheet - Page 1 of 1

DEPENDENTS:

RELATIONSHIP
Son
12
Son
11
Son
8
Daughter
5
Son
3
Daughter
3 mo.

© 1993-2007 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Document

Page 35 of 40

IN RE Acosta, Mario A. & Acosta, Maria R.

Debtor(s)

_ Case No. _ (If known)

| SCHEDULE J - CURRENT EAPENDITURES OF INDIVIDUAL DEBTOR(S | , | |
|--|----------------|-------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate ar quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deduction Form22A or 22C. | | |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a expenditures labeled "Spouse." | separate | schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | |
| a. Are real estate taxes included? Yes ✓ No | | |
| b. Is property insurance included? Yes ✓ No | | |
| 2. Utilities: | | |
| a. Electricity and heating fuel | \$ | 100.00 |
| b. Water and sewer | \$ | |
| c. Telephone | \$ | 60.00 |
| d. Other | - ^c | |
| 3. Home maintenance (repairs and upkeep) | - o | |
| 4. Food | \$ —— | 700.00 |
| 5. Clothing | \$ | 20.00 |
| 6. Laundry and dry cleaning | \$ | 10.00 |
| 7. Medical and dental expenses | \$ | |
| 8. Transportation (not including car payments) | \$ | 61.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | |
| 10. Charitable contributions | \$ | |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | |
| b. Life | \$ | |
| c. Health d. Auto | ⁶ | 58.00 |
| e. Other | Ф Ф | 30.00 |
| e. Other | - \$ | |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | _ Ψ | |
| (Specify) | \$ | |
| | - \$ | |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | |
| b. Other | _ \$ | |
| | _ \$ | |
| 14. Alimony, maintenance, and support paid to others | \$ | |
| 15. Payments for support of additional dependents not living at your home | \$ —— | |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)17. Other ADD Medication For Child | ф —— | 27.00 |
| 17. Other ADD medication for Crinic | - § | 27.00 |
| | _ \$ | |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if | ¢ | 1,036.00 |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data. | Φ | 1,030.00 |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of t | his docum | nent: |

None

20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$ 4,398.39 |
|--|-------------|
| b. Average monthly expenses from Line 18 above | \$1,036.00 |
| c. Monthly net income (a. minus b.) | \$ 3,362.39 |

Document

Entered 01/08/08 13:31:29 Page 36 of 40

Desc Main

(If known)

(Print or type name of individual signing on behalf of debtor)

IN RE Acosta, Mario A. & Acosta, Maria R.

© 1993-2007 EZ-Filing, Inc. [1-800-998-2424] - Forms

Debtor(s)

Case No.

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **24** sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: **January 8, 2008** Signature: /s/ Mario A. Acosta Debtor Mario A. Acosta Date: January 8, 2008 Signature: /s/ Maria R. Acosta (Joint Debtor, if any) Maria R. Acosta [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature:

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

 $_{B7}$ (Official Form) $_{B7}$ (208) -00304

Doc 1

Filed 01/08/08

Entered 01/08/08 13:31:29

Desc Main

Document Page 37 of 40 **United States Bankruptcy Court**

Northern District of Illinois

| IN RE: | Case No. |
|-------------------------------------|------------|
| Acosta, Mario A. & Acosta, Maria R. | Chapter 13 |
| | - |

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 2007: approx. \$.00;

2006: approx. \$45,800.00; and 2005: approx. \$43,700.00.

2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 Food Stamps

2007: approx. \$3,500.00; 2006: approx. \$0.00; and 2005: approx. \$0.00.

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER Wells Fargo Bank v. Mario Acosta et al., 07 Ch 1519

NATURE OF PROCEEDING **Complaint To Foreclose** Mortgage

COURT OR AGENCY AND LOCATION Circuit Court of Cook County, **County Department, Chancery** Division

STATUS OR DISPOSITION sale set for 1/29/08

© 1993-2007 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the** commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

List all property owned by another person that the debtor holds or controls.

 \checkmark

15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 $\overline{\mathbf{V}}$

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

Case 08-00304 Doc 1 Filed 01/08/08 Entered 01/08/08 13:31:29 Desc Mai

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

Non

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

Non

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: January 8, 2008

Signature /s/ Mario A. Acosta

of Debtor

Mario A. Acosta

Date: January 8, 2008

Signature /s/ Maria R. Acosta

of Joint Debtor

(if any)

Maria R. Acosta

_____**0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.